

Supplemental		Attorney Docket Number	60748.300101
Application Data Sheet 37 CFR 1.76		Application Number	10/709,965
Title of Invention	SYSTEM FOR SELECTIVE DISABLEMENT AND LOCKING OUT OF COMPUTER SYSTEM OBJECTS		
<p>The application data sheet is part of the provisional or nonprovisional application for which it is being submitted. The following form contains the bibliographic data arranged in a format specified by the United States Patent and Trademark Office as outlined in 37 CFR 1.76.</p> <p>This document may be completed electronically and submitted to the Office in electronic format using the Electronic Filing System (EFS) or the document may be printed and included in a paper filed application.</p>			

Secrecy Order 37 CFR 5.2

- ☐ Portions or all of the application associated with this Application Data Sheet may fall under a Secrecy Order pursuant to 37 CFR 5.2 (Paper filers only. Applications that fall under Secrecy Order may not be filed electronically.)

Applicant Information:

Applicant 1				
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
Mr.	Philip		Lieberman	
Residence Information (Select One) <input checked="" type="radio"/> US Residency <input type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Beverly Hills	State/Province	CA	Country of Residence ⁱ
Citizenship under 37 CFR 1.41(b) ⁱ		US		
Mailing Address of Applicant:				
Address 1		9107 Wilshire Blvd., # 450		
Address 2				
City	Beverly Hills	State/Province	CA	
Postal Code	90210	Country ⁱ	US	
Applicant 2				
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name	Suffix
Mr.	Nicholas	M.	Carroll	
Residence Information (Select One) <input checked="" type="radio"/> US Residency <input type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
City	Los Angeles	State/Province	CA	Country of Residence ⁱ
Citizenship under 37 CFR 1.41(b) ⁱ		US		
Mailing Address of Applicant:				
Address 1		11870 Washington Pl. #302		
Address 2				
City	Los Angeles	State/Province	CA	
Postal Code	90066	Country ⁱ	US	
All Inventors Must Be Listed - Additional Inventor Information blocks may be generated within this form by selecting the Add button.				

Correspondence Information:

<p>Enter either Customer Number or complete the Correspondence Information section below.</p> <p>For further information see 37 CFR 1.33(a).</p> <p><input type="checkbox"/> An Address is being provided for the correspondence Information of this application.</p>

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Title of Invention	SYSTEM FOR SELECTIVE DISABLEMENT AND LOCKING OUT OF COMPUTER SYSTEM OBJECTS		
Customer Number	74029		
Email Address	pfiler@ipvglaw.com	Add Email	Remove Email

Application Information:

Title of the Invention	SYSTEM FOR SELECTIVE DISABLEMENT AND LOCKING OUT OF COMPUTER SYSTEM OBJECTS		
Attorney Docket Number	60748.300101	Small Entity Status Claimed	<input checked="" type="checkbox"/>
Application Type	Nonprovisional		
Subject Matter	Utility		
Suggested Class (if any)	726	Sub Class (if any)	023
Suggested Technology Center (if any)	2434		
Total Number of Drawing Sheets (if any)	3	Suggested Figure for Publication (if any)	2

Publication Information:

<input type="checkbox"/>	Request Early Publication (Fee required at time of Request 37 CFR 1.219)
<input type="checkbox"/>	Request Not to Publish. I hereby request that the attached application not be published under 35 U.S.C. 122(b) and certify that the invention disclosed in the attached application has not and will not be the subject of an application filed in another country, or under Supplemental international agreement, that requires publication at eighteen months after filing.

Representative Information:

Representative information should be provided for all practitioners having a power of attorney in the application. Providing this information in the Application Data Sheet does not constitute a power of attorney in the application (see 37 CFR 1.32). Enter either Customer Number or complete the Representative Name section below. If both sections are completed the Customer Number will be used for the Representative Information during processing.			
Please Select One:	<input checked="" type="radio"/> Customer Number	<input type="radio"/> US Patent Practitioner	<input type="radio"/> Limited Recognition (37 CFR 11.9)
Customer Number	74029		

Domestic Benefit/National Stage Information:

This section allows for the applicant to either claim benefit under 35 U.S.C. 119(e), 120, 121, or 365(c) or indicate National Stage entry from a PCT application. Providing this information in the application data sheet constitutes the specific reference required by 35 U.S.C. 119(e) or 120, and 37 CFR 1.78(a)(2) or CFR 1.78(a)(4), and need not otherwise be made part of the specification.			
Prior Application Status		Remove	
Application Number	Continuity Type	Prior Application Number	Filing Date (YYYY-MM-DD)
Additional Domestic Benefit/National Stage Data may be generated within this form by selecting the Add button.			

Foreign Priority Information:

Supplemental		Attorney Docket Number	60748.300101
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This section allows for the applicant to claim benefit of foreign priority and to identify any prior foreign application for which priority is not claimed. Providing this information in the application data sheet constitutes the claim for priority as required by 35 U.S.C. 119(b) and 37 CFR 1.55(a).

			Remove
Application Number	Country ⁱ	Parent Filing Date (YYYY-MM-DD)	Priority Claimed
			<input type="radio"/> Yes <input type="radio"/> No
Additional Foreign Priority Data may be generated within this form by selecting the Add button.			

Assignee Information:

Providing this information in the application data sheet does not substitute for compliance with any requirement of part 3 of Title 37 of the CFR to have an assignment recorded in the Office.

Assignee 1			
If the Assignee is an Organization check here. <input checked="" type="checkbox"/>			
Organization Name	Lieberman Software Corporation		
Mailing Address Information:			
Address 1	9107 Wilshire Boulevard, Suite 450		
Address 2			
City	Beverly Hills	State/Province	CA
Country ⁱ	US	Postal Code	90210
Phone Number		Fax Number	
Email Address			
Additional Assignee Data may be generated within this form by selecting the Add button.			

Signature:

A signature of the applicant or representative is required in accordance with 37 CFR 1.33 and 10.18. Please see 37 CFR 1.4(d) for the form of the signature.					
Signature	/Raymond E. Roberts/		Date (YYYY-MM-DD)	2009-06-16	
First Name	Raymond	Last Name	Roberts	Registration Number	38597